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admitted March 25, 1819



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Hepatitis

Hepatitis is a disease of the liver arising from inflammation in that viscay: It has a common origin with most or all of the Phlegmasiae: It may be produced by external causes, as blows or bruises; immoderate exercise; concussions in the substance of the liver; summer heats; winter colds, & especially variable moist weather; high living; intemperance in wine & spirituous liquors, and long protracted intermitteal,

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of remitted Fevers. Why these latter causes should
direct inflammation to some particular part,
or viscera rather than others, seems to me almost
inexplicable. It has generally I believe been at-
tributed to the debility of the part affected.

Dr Rush has remarked that intem-
perance in the use of Wine generally produces —
Gout; And intemperance in ardent spirits oc-
casions disease of the liver. I have found this
remark true in the Western States, especially in
Tennessee. In that Country the gout is hardly
known on account of the scarcity of Wine, but
the profuse use of Whiskey adds annually to
an sick list hundreds laboring under
debility.

But perhaps the most frequent of the
causes which I have enumerated is the
long protraction of our Autumnal In-
termittent, & Remitted bilious Fevers.

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with which our citizens are so frequently afflicted. The absurd opinion that this disease is the offspring of books and other medicines used by practitioners is clearly disproved by the fact of its greatest prevalence among those who employ no remedies in the case of it. And by the further proof, if more testimony be required, that the bark itself frequently cures patients laboring under chronic hepatitis after promising some general evacuant.

Blows on the Head. &c. a burning vertebra, &c. have been ranked among the causes of hepatitis; And indeed we should not at all wonder at it, when we take into consideration the close connexion, and very strict sympathy which exists between the head & the seat of this disease. This is particularly evinced by an alteration of the qualities of the bone from injuries of the skull; and inversely by the facility with which delirium is produced from inflammations of the brain.

According to most writers who have treated

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of hepatitis it is most frequent in damp tropical, or
salty climates. It has exacted a full share of consider-
ation from the East & West India planters: And
as well as those countries calculated for its production
that Europeans & interior Americans on their arrival
there expect its attack with almost as much certain-
ty as they wrote the Plague when they had inhaled
its noxious atmosphere.

May not marsh marmata produce inflam-
mation of the liver in the same way that dysentery is
supposed to have its origin from febrile mephitism?

It is thought that the choleric & melancholic tem-
peraments are propitious to the nurture of this disease
and that adults are often afflicted with it than
those in earlier life. Some have conceived that the
small liver of the bear is oftenest the seat of the
disease. It has been believed that the outer or convex
surfaces are often attacked than the inferior or
concave. But in a remedial point of view these dis-
cussions are of little importance, & indeed the truth

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is only to be obtained by dissection after the death of the patient.

In some cases the pain extends into the left shoulder, and then the left lobe is supposed to be diseased. But all the grounds we possess of determining the precise situation of the complaint, without recourse to dissection, are deducible from the conjunction of those symptoms that are attendant upon the inflammation of the neighbouring viscera, viz: if there is evident marks of Gastritis; acute pain, and burning heat in the stomach; hiccup & tension in the gastric region we conclude that the parts near the stomach are affected. But if the patient has a difficulty in breathing & dry cough, together with the symptoms of pneumonick inflammation, we are induced to believe that the disease is seated contiguous to the diaphragm.

Hepatitis has been divided by pathologists into Acute and Chronic, according as it is supposed to partake of Acute, or ^{Chronic} inflammation, or in

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the language of Dr Thomas, according as it shows the
epicardial character of genuine inflammation or whether
its symptoms of less violence as to its inflammatory ten-
dency: though the gradations from one to the other are
so regular, and easy that we will find it very dif-
ficult to establish a proper, or palpable line of de-
marcation.

Acute Hepatitis is ushered in with a sense of
chilliness, succeeded generally by a severe pain in the
right hypochondrium, extending along the side into
the right shoulder, & clavicle. The patient is often
as with a severe cough & dyspnoea; lies with dif-
ficulty on any other than the side affected, makes
frequent efforts to vomit, owing to a great nausea;
is sickish at stomach; sometimes large quantity
of bilious matter are dislodged; but in a majority
of cases there is a deficiency of bilious secretion;
the bowels are generally inactive and the contents
when excreted commonly indicate too little bilious
matter; there is great thirst with a want of appetite.

* There is great debility, induced probably by the very constant vigilance which is attendant on this disease; And because of the very great sympathy which exists between the head and brain delirium more generally supervenes on this than any other of the Phlegmatics except gouty.

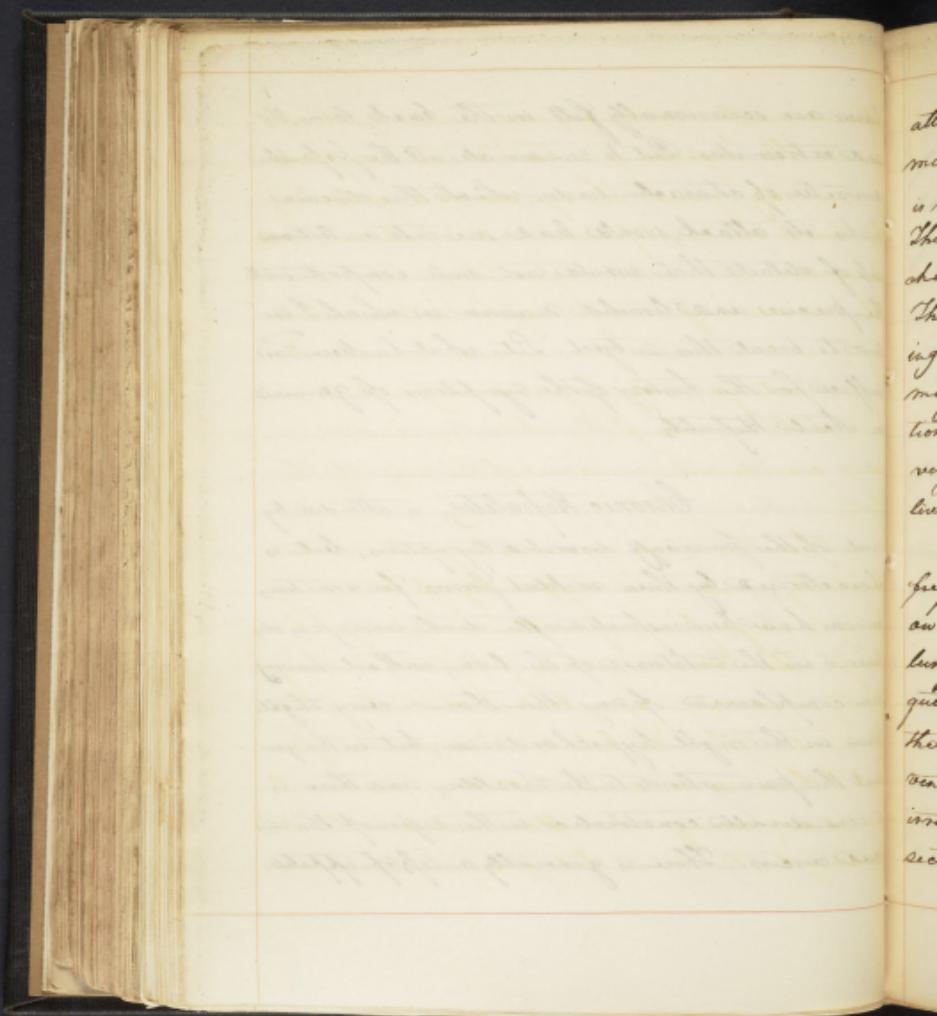
the skin is hot and dry; and when the disease has continued a few days, it together with the tunicas conjunctivæ of the eyes are dead of a deep yellow colour; The tongue is covered sometimes with a white, & sometimes a yellow fur; The pulse is frequent hard and strong; The blood when drawn exhibit a buffy coat, and its serum generally indicates a superabundance of bile, &c.

But this disease is attended with very various symptoms, at one time there shall be chills & shivers together with every other physical symptom attended with a tightness across the chest, or precordia for some days before the discovery of the diagnostic symptoms of the disease; And at another time acute pain in the neighbourhood of the liver shall be among the first symptoms. The pain is sometimes fixed, at others desultory and shifting; One while it is acute at another obtuse & deep seated; The right hypochondrium, breast, shoulder, & clavicles are alternately the seat of affection. Wandering

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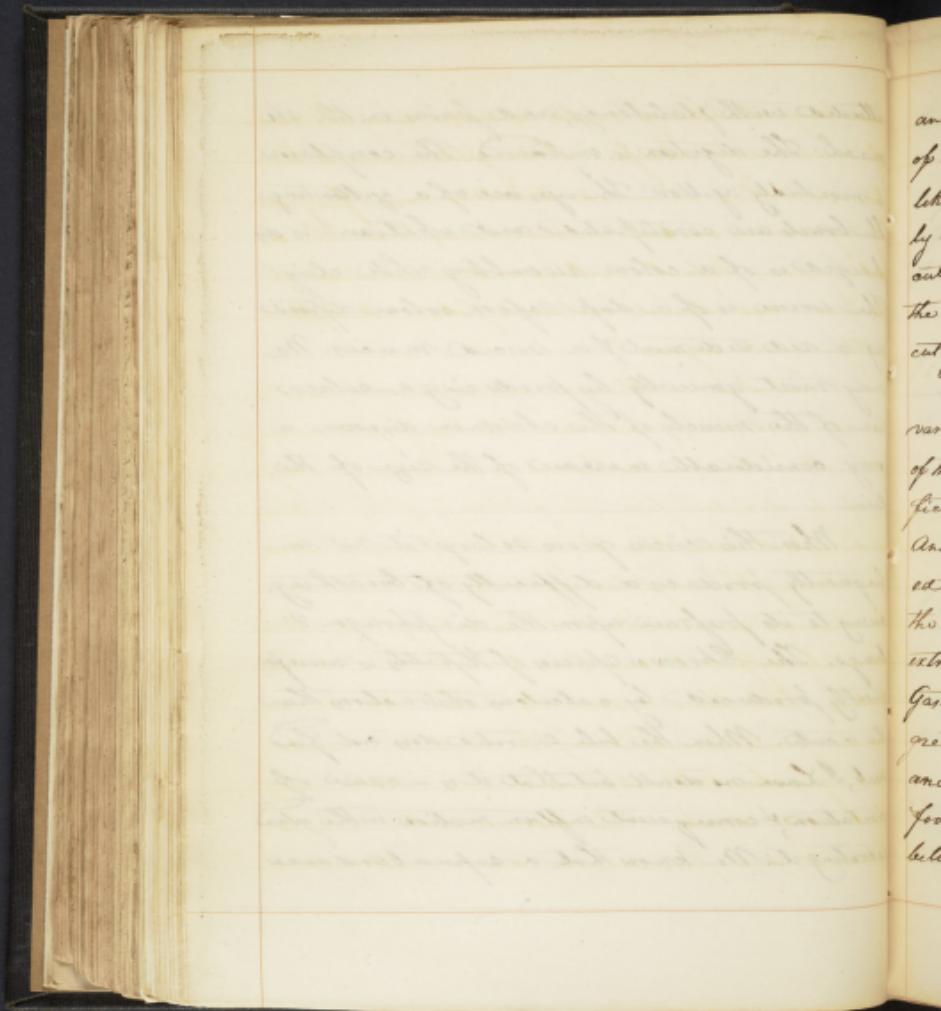
pains are occasionally felt in the back, loins, &c and extremities: But to enumerate all the possible diversities of character under which this disease makes its attack, would lead me into a tedious nap of detail that would not rule comfort with the precise and limited manner in which I intended to treat this subject. Let what has been said suffice for the history of the symptoms of genuine or Acute Hydrocephalus.

Chronic Hydrocephalus, is attended by most of the previously described symptoms; but is characterized by these marked forms: For sometimes persons have been inspissated after death, and found covered in the substance of the brain, without having ever complained of any other than a very slight pain in the right hypochondriac; but in the gen^tral the pain extends to the shoulder, and there is a considerable constriction in the region of the digested viscera. There is generally a loss of appetite



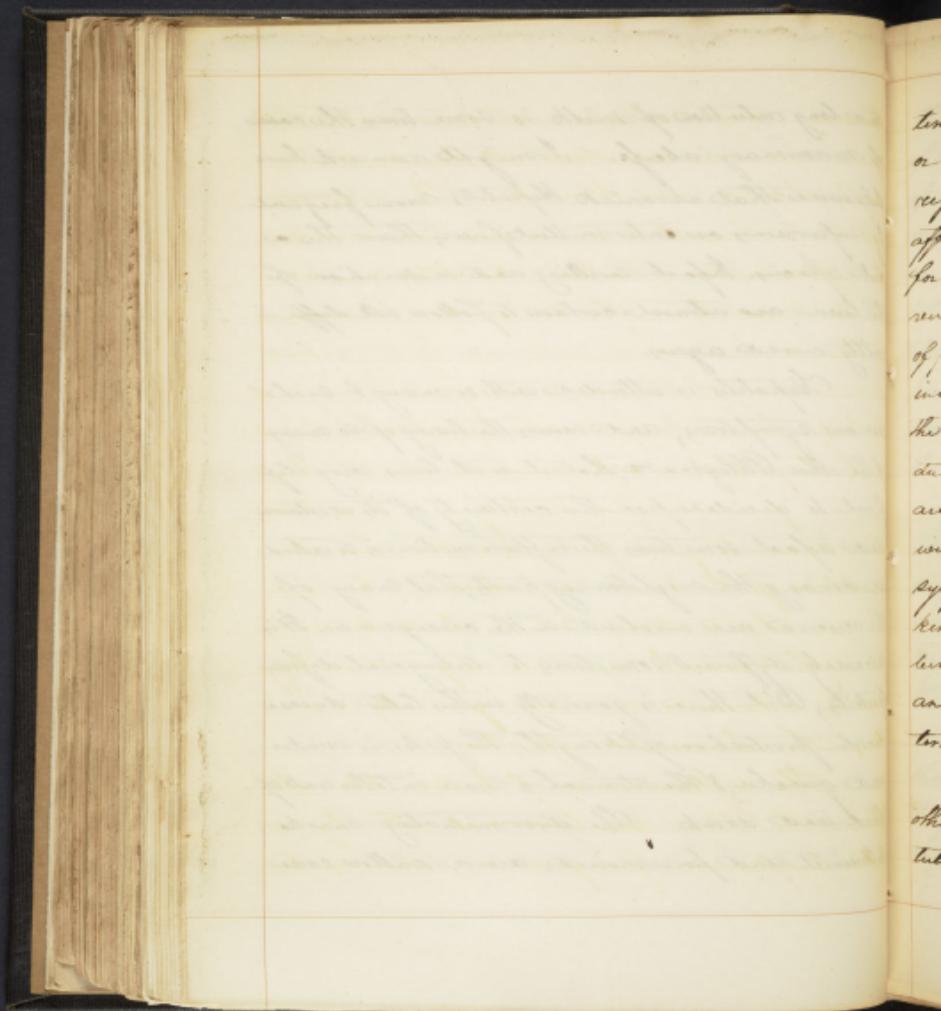
attended with flatulency, and pains in the sto-
mach. The digestion is impaired. The complexion
is morbidly yellow. The eyes are of a yellowish
The bowels are constipated and whatever is di-
charged is of a colour resembling white clay:
The urine is of a deep saffron colour contain-
ing a red sediment, & a viscid mucus. We
may most generally by producing a relaxa-
tion of the muscles of the abdomen discern a
very considerable increase of the size of the
liver.

When this viscus grows so large it not un-
frequently produces a difficulty of breathing,
owing to its pressure upon the diaphragm &
lungs. The Chronic species of hepatic is more fre-
quently produced by calculous obstructions than
the acute. When the bile excreted does not find
exit, I have no doubt but that it is a cause of
irritation, & consequent inflammation in the gland
secreting it. We know that a superabundance



and long retention of milk is some time the cause of mammary abscess. I might remark here likewise that chronic Hepatitis more frequently supervenes on ~~intermittent~~ fever, than this or acute species. Infact swelling and induration of the liver are almost certain to follow all ~~diff-~~ cutely cured agues.

Hepatitis is attended with so many & such various symptoms, and wears the likeness of so many of the other Phlegmas, that it is at times very difficult to decide upon the certainty of its existence; And infact sometimes the inflammation is scattered among the neighbouring parts, that many of the vessels are involved in the consequences. It is extremely difficult some time to distinguish it from Gastritis; But there is generally in this latter disease greater prostration of strength; the pulse is weaker and quicker; & the stomach is more intolerant of food and drink. The discriminating marks between it and pneumonitis, are a shallow cough



tenacious cough without much expectoration; little or no dyspnoea; and above all the pain in the right shoulder, and blavicle. The spasmodic affection of the gall-ducts is sometimes mistaken for inflammation of the liver. Hepatitis may however be known from this disease by a permanency of pain; a want of nausea; and by the patient's indisposition of position, as it respects the angle of the body; for in the spasmodic affection of the gall-ducts the patient is only quiet when the thighs are bent forward upon the body. I have however known the pain of the shoulder when the symptoms of the trunk were obscure, to be mistaken for rheumatism; but it should be remembered that redness and some degree of swelling and a metastatic disposition generally characterize the rheumatic affection.

The inflammation of the liver like all others of the Phlegmata terminates either by resolution, suppuration, Gangrene or Sclerosis. And

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these convulsions are governed by the violence
of the symptoms; or the proper, or improper use
of remedy. We can be assured of the effect
of the resolution of the inflammation by
an abatement of the febrile symptoms, with-
out much loss of strength; a return of the appre-
hensive & an improvement of the complexion. In de-
pendent of the remedies employed there are
sometimes viscidous discharge of blood from
the nose or hemorrhoidal infus; or a puru-
lent secretion of mucus from the bronchia.
The disease sometimes terminates in a copious
diaphoresis, - a bilious diarrhoea or plentiful
urinary discharge, depositing a copious sediment.
Coryza has likewise been known to appear on
the solution of this disease.

But if after ~~using~~ all the remedies that
should be employed there is no abatement of
the pain, & pyrexial symptoms; the skin dry, and
hot, the tongue parched; and the pulse full

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frequent, attended with rigors, we may prove
disease approaching suppuration. But of this how-
ever we may ~~not~~ be certain, by a sudden ex-
acerbation of pain, great weight in the region of the
liver; the paroxysm of the fever increasing in
the evening; flushing of the face; night sweats
and other hectic symptoms; for these are al-
most unerring tokens of the formation of mat-
ter in some internal part. Constant hiccup
cold extremities and sinking pulse denote gangrene.

The termination in gangrene is very rare
in temperate climates, and infact it is said to oc-
cur but seldom in the Indies. When gangrene superv-
enes, there is not the least ground of hope for
recovery. Death is to be sought for in Resolution
alone; Nevertheless patients sometimes recover
after the formation of matter, if there happens to
be a favorable evacuation. Inflammation has
been known to attack the liver to the peritoneum,
and in such a case the matter may be drawn

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off by a suitable opening & the patient recover.
Or the concave surface may attach itself to the
stomach or intestines, and by the process of
ulceration an opening may be formed for the
passage of the pus into their cavities. I have seen
one or two cases where the matter was expectora-
ted, and the right shoulder joint became em-
physematous. There I suppose the abscess to be
situated on the convex surface adjoining the
diaphragm and that it together with the lungs
was involved in the inflammation: And the ulc-
erative process formed a communication that ad-
mitted the passage of the matter into the lungs
whence it was expectorated in the same way
as if it had been primarily formed in the cavity.

But I am induced to believe that the
cases in which the matter is evacuated in any
one or all of the ways above mentioned, are
very small in comparison with those in which
the pus is retained, or more discharged in the

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cavity of the abdomen; and that consequently the proportion of cures are very small compared with those ending fatally. In the last stage of this disease those symptoms supervene which are present in the last stage of pulmonary consumption; hectic fever, profuse night sweats, & ~~colic~~ ^{an} ~~liver~~ diarrhoea &c.

Tetanosity is sometimes a termination of acute hepatitis, but it most commonly follows an attack of the chronic species; and indeed we frequently find the liver very much swollen without discovering any of the symptoms of inflammation, this is particularly the case in that swelling of the liver vulgarly called hypate ague cake which succeeds to an attack of bilious hepatitis. The chronic species hardly ever terminates in suppuration, & hence we may infer that danger is principally to be apprehended from tetanosity. Induration of the liver destroys the healthy biliary secretion and thereby ruins digestion, nutrition & peritoneal

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tion, and consequently produces emaciation drophy and death. I have generally found that those patients who could trace the cause of their disease to the excessive use of and eat spirits more frequently died drophyal than any others.

Treatment.

I shall now proceed to detail the practice that is proper to be pursued in the treatment of this disease: And as first in order I shall commence with Acute Hepatitis. The great importance of the liver argues the necessity of suffering no time to intervene between the commencement of this formidable disease and the employment of our remedies. It is true that the apprehension of immediate fatality, from an attack of Hepatitis is not so great as from inflammation of some of the other viscera; but death ultimately is not

the life certain. Great inflammation of the liver without a speedy, & proper recourse to remedy, is as necessarily fatal as gastritis, enteritis, or pneumonia.

The leading indication is to lessen, or alter the inflammatory action, so as to prevent the supervention of gangrene, or that almost equally alarming termination - the formation of matter in that viscus. To meet this view we must direct the strictest antiphlogistic regimen; copious diaphoresis, & sparo diet; But it will require some judgement to determine how long it should be continued; for very little advantage can be expected from it when the inflammation has advanced beyond the probability of resolution or when suppuration has actually commenced. For the purpose above mentioned we should subtract eighteen or twenty ounces of blood as soon as we shall have satisfied ourselves of the nature of the complaint: I have ordered a large quantity, be

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cause I conceive it of the utmost importance
to commence with as large a bleeding as the pa-
tient can well bear. The final recoveries much
more certain & speedy from this method of e-
vacuating the vascular system, than when
small quantities are taken, and the operation
is often repeated. In a farther use of the lancet
I should regard the admonitions of the pulse
and the signs exhibited on an examination of the
blood. If the first by its strength, fullness, & tension;
and the latter by the appearance of a buffy coat,
should indicate its necessity, I would repeat the
operation occasionally. Some practitioners
have confined venesection to those cases in which
the most violent symptoms prevail; But if on
visiting my patient, I can be certain that he has
just been attacked, even though the symptoms
be mild, and indicate the existence of little
inflammation, I should pursue the same treat-
ment, because I know the equivocal & insidious

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manner in which it frequently makes its attack. There is no doubt that many lives have been lost by injudiciously wavering between the propriety & impropositeness of bleeding under such circumstances. If we delay the remedy only for a short time we permit the inflammation to proceed to the suppurative stage. It is likewise important to let the blood flow from the general circulation in a large stream. By doing so it more effectually lessens febrile action, and permits the blood vessels to contract to a healthy sized caliber. When the blood merely trickles from a small orifice it contributes very little to the relief of the patient.

Capping & leeching have been likewise recommended with advantage after the use of general bloodletting; But to be effectual they must be used with greater liberality than is customary with European practitioners. The employment of only three or four leeches

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has little or no effect in removing local con-
gestion; whereas the greatest good often results
from using twenty, thirty or even fifty at a time.

As auxiliary to blood-letting we should
not neglect the application of Epsipastics as
soon as the pulse has been reduced. The ap-
plication of a large ~~blistering~~ plaster to the hy-
pochondriac region, very frequently ensures the
most happy results. The employment of so stem
a remedy was, for a long time totally
irreconcileable with the principles of theorising
until Mr John Hunter discovered this univer-
sal law of the animal economy that no two
actions of equal force could exist in the sys-
tem at the same time. Thus it is we cures one
disease by exciting another. May I not use
this language that as the resolution of in-
flammation from epsipastics is earlier than
that of common phlegmonous inflammation
according to the above law of Mr Hunter, a

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general resolution diathesis is produced, and a rotation of the inflamed viscera takes place in consequence of that general disposition to resolution. Does the benefit of blistering result sooner than the artificial inflammation begins to be resolved?

But to return: I think it much better to apply a large etherastic at first than to use small ones frequently repeated; because the benefit expected must be soon or we can not hope for any! After suppuration commences we may decline their use.

There is another very important part of the antiphlogistic treatment to which I shall advert, Viz! the use of spongating. It is proper to commence with this class of remedies as early as practicable, or as soon as we have bled the patient. Almost any of the bathartics will answer the intention. Doctor Saunders who has treated very elegantly,

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learnedly on the diseases of the liver, speaks
in the highest commendation of the Neutral Salts:
But the mercurial purgatives have been gene-
rally considered best by practitioners in
the Southern States. They are believed by-
them to possess almost a specific power in
enulging the biliary vessels & thereby rele-
ving them from the engorgement that pre-
vails in Hepatitis. It is usual to give 15.
or 20 grs. of Calomel & if it is hardy in its
operation to super add some one of the neu-
tral Salts: Sulphate of Soda, Sulphate of
Magnesia or Super tartar of Potash: I
prefer the latter because it not only acts
upon the bowels, but excites a gentle dia-
phoresis, which is well known to have a won-
derful effect in subduing inflammation.
To the same end nauseating doses of some
of the Aromaticals are given, as like wise
some of the vegetable emetics.

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If the Calomel does not act effectually which is known by the quantity, and quality of the discharge, it is repeated on the second or third day, being always however guarded by the same principle, which regulates the use of the lancet. Some practitioners use mercury in this species of Hepatitis, not merely with the intention of opening the alimentary canal, thereby lessening febrile action; But if after pursuing the depilating plan pretty extensively they find that the inflammation is hard to subdue, they give Calomel in smaller quantity with the view of exciting a salivation. Thus instituting a new action which supercedes the morbid one. Doctor Saunders objects to the use of Mercurial preparations in acute Hepatitis "that they are too stimulating for the already too much excited system. To this I might reply that the advantages gained by their specific action on the liver more than counterbalance any injurious effects resulting from the stimu-

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along powers which they are presumed to possess.
Calomel by exciting an action of its own in the
liver checks the morbid inflammatory action
in the body.

If the means above directed should not
interrupt the tendency to suppuration it will
be necessary to change the course: to give bark,
wine, and a nutritious diet in order to pro-
cure the formation of healthy pus. Or if from
the symptoms we are convinced that the inflam-
mation has changed its form to that of
the chronic kind, we will find it proper to
pursue the treatment necessary for that species.
In this too we find the preparation of mercury to be
the best medicine. They are not however given with the
view of purging alone, but mostly for the purpose
of exciting a salivation. They should be given in
small doses, frequently repeated - aggravated by a
copperish taste in the mouth & a very gentle ptya
less. They promote the secretion of the bile, & excite a

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gentle perspiration. To increase the latter of
feet they are sometimes combined with a
small quantity of some of the Batomoneals &
when they pass too readily through the alimen-
tary canal it is usual to combine with them
a small quantity of opium in the form of pills.
The following formulae from Dr Thomas I have
found as a very good one.

R. Hydroargy. submersa - 5j
Opia Purp. 2j
Batumone. Tartarizat. grs. vi.

Syrup. Simplic. gr. M
ft Masa in Pellet. lb. divid. 1 manu
et nocte gustidie sumenda.

The following is likewise a very good formula

R. Hydroargy. Cor. Tartar. grs. vi
Opia Purp. " vi
Colicose. Specie. S. XXIV.
Simplic. Syrup. grs. M.

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ft. mafsa in Pibbet. x1viii. divide
.. give 2 or 3 in the course of 24 hours as may
be necessary.

As auxiliary to the above method of giving
mercury we may rub it on the skin in the form
of ointment. It has generally been directed to be
rubbed either immediately over the diseased part
or on the inside of the arms, & thighs, near the
groins & axilla; but I am uncertain which is best,
owing to the mysterious action of mercury; Per-
haps it would be preferable to use it imme-
diately over the diseased viscera after employing
mercurials.

Blisters are likewise very useful in this
form of leprosy and especially when it has
become ichorous; But here a constant succep-
tion of moderate sized blisters are better than
keeping up a discharge from an old one. The
disease has become conformed and it will

require the use of remedies for a considerable time.
The practice above detailed is very successful
in that schorosity which follows Intermittent &
Remittent Fevers.

It is necessary that patients labouring under Hydrocephalus should observe a very strict dietary regimen. The diet best adapted for them is such as is nourishing and easy of digestion; avoiding however salta meat and greasy substance. When they be come convalescent they may be allowed to improve their diet by the addition of brothy & light animal food. But in every stage of this complaint the luxurious must abandon the pleasure of sumptuous tables; And the drum drummers must lay aside the use of the bottle. Water is then ~~best~~ beverage; but if they must have something stronger, they had best use wine largely diluted. Late hours and night air should be cautiously avoided.

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